$\label{lem:weight} Virginia-Request\ to\ Amend\ 11-W-00297/3$ Virginia Governor's Access Plan for the Seriously Mentally III (GAP) Demonstration

In accordance with the Special Terms and Conditions agreed to by both the Centers for Medicare and Medicaid Services (CMS) and the Virginia Department of Medical Assistance Services (DMAS), DMAS herby submits the following requested amendment to the Governor's Access Plan for the Seriously Mentally Ill (GAP) Demonstration. The following amendment is structured in accordance with paragraph 7 of the Special Terms and Conditions.

a) An explanation of the public process used by the state, consistent with the requirements of paragraph 14 (adequacy of infrastructure), to reach a decision regarding the requested amendment;

During Virginia's 2015 legislative session, members of the house and senate came together during the budget conference process and agreed upon a proposal (further discussed in section d) and was ultimately approved by both chambers of the legislature and sent to the Governor for his signature. As an action of the Virginia legislature, this process was public and receives both formal and informal participation and monitoring by advocates, stakeholders, and state staff. There are some advocates in Virginia who are disappointed with the decision and have voiced their concerns with the program eligibility change both vocally and in writing. While amending the eligibility threshold is not the favored action of the administration, the fact that the budget conferees agreed to leave the remaining pieces of the GAP demonstration, is greatly appreciated.

The requirements outlined in paragraph 14 are not of concern, the infrastructure of the GAP demonstration remains strong and intact. This amendment is the outcome of the action taken by the Virginia General Assembly.

b) An up to date CHIP allotment neutrality worksheet, if necessary:

Not applicable

c) A detailed description of the amendment, including impact on beneficiaries, with sufficient supporting documentation;

Pertaining to the outlined process for determining the need for this amendment, the budget language dictating the specific eligibility parameters can be found in Attachment A. Essentially, effective July 1, 2015, individuals with serious mental illness who apply to the program and meet other eligibility criteria may have a household income up to 60% (55 +5% income disregard) of the federal poverty level (FPL). Concerning individuals enrolled in the program, prior to this legislative change, all individuals between 61% and 100% of the FPL enrolled in the demonstration as of May 15, 2015, who continue to meet other program eligibility rules, shall maintain enrollment in the demonstration until their next eligibility renewal period or July 1, 2016, whichever comes first.

It has been expressed by stakeholders and is understood by state staff, that individuals who currently receive services but who will lose eligibility based on the qualify FPL change, will need to be strongly supported during their transition. DMAS will work with the existing contractors and the existing local community services boards and other preferred pathway partners to ensure that these individuals have supports needed to continue to seek stability of the physical and mental health needs of the GAP members transitioning out of the program. DMAS is closely monitoring the number of individuals possibly impacted by this change in eligibility, and impacted individuals will lose coverage at the end of their eligibility year, or by July 1, 2016.

d) If applicable, a description of how the evaluation designs will be modified to incorporate the amendment provisions.

The GAP demonstration evaluation design will not need to be modified as a result of these amendment provisions.

APPENDIX A

Item 301 #2c (modified to reflect changes to the GAP demonstration, ONLY)

Health and Human Resources

Language:

Page 257, line 32, strike "\$8,136,734,114" and insert "\$8,167,666,603". Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,739,983,324".

Page 281, after line 10, insert:

"OOOO.1. The Department of Medical Assistance Services shall amend the Medicaid demonstration project (Project Number 11-W-00297/3) to modify eligibility provided through the project to individuals with serious mental illness to be effective July 1, 2015. Income eligibility shall be modified to limit services to seriously mentally ill adults with effective household incomes up to 60 percent of the federal poverty level (FPL). All individuals enrolled in this Medicaid demonstration project with incomes between 61% and 100% of the Federal Poverty Level as of May15, 2015 who continue to meet other program eligibility rules, shall maintain enrollment in the demonstration until their next eligibility renewal period or July 1, 2016, whichever comes first. Benefits shall include the following services: (i) primary care office visits including diagnostic and treatment services performed in the physician's office, (ii) outpatient specialty care, consultation, and treatment, (iii) outpatient hospital including observation and ambulatory diagnostic procedures, (iv) outpatient laboratory, (v) outpatient pharmacy, (vi) outpatient telemedicine, (vii) medical equipment and supplies for diabetic treatment, (viii) outpatient psychiatric treatment, (ix) mental health case management, (x) psychosocial rehabilitation assessment and psychosocial rehabilitation services, (xi) mental health crisis intervention, (xii) mental health crisis stabilization, (xiii) therapeutic or diagnostic injection, (xiv) behavioral telemedicine, (xv) outpatient substance abuse treatment services, and (xvi) intensive outpatient substance abuse treatment services. Care coordination, Recovery Navigation (peer supports), crisis line and prior authorization for services shall be provided through the agency's Behavioral Health Services Administrator. The department shall have authority to implement necessary changes upon federal approval and prior to the completion of any regulatory process undertaken in order to effect such changes.

Explanation:

(This amendment adds \$14.9 million from the general fund and \$16.0 million from nongeneral funds the first year and \$104.3 million from the general fund and \$119.9 million from nongeneral funds the second year to (i) provide limited medical services, including coverage of prescription medicines, and a robust set of behavioral health services to 21,600 adults with serious mental illness with incomes at or below 60 percent of the federal poverty